

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Cruz for President**

**A. Full Name (Last, First, Middle Initial)**

**MR. MICHAEL B. DELMAR**

Mailing Address **114 E. WASHINGTON AVENUE**

City	State	Zip Code
CONNELLSVILLE	PA	15425-4137

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**PENN LINE SERVICE, INC.**

Occupation  
**VICE PRESIDENT OF FINANCE & CFO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17.281141**

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		05		2015

**CONTRIBUTION**

Amount of Each Receipt this Period

**1000.00**

**B. Full Name (Last, First, Middle Initial)**

**MAKAN DELRAHIM**

Mailing Address **24753 VANTAGE POINT TERRACE**

City	State	Zip Code
MALIBU	CA	90265-4739

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**BROWNSTEIN HYATT**

Occupation  
**ATTORNEY**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1250.00**

**Transaction ID : SA17.349123**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

**CONTRIBUTION**

Amount of Each Receipt this Period

**1000.00**

**C. Full Name (Last, First, Middle Initial)**

**MR JAMES DELSIGNE**

Mailing Address **23 HIDDEN VALLEY DR.**

City	State	Zip Code
CLANCY	MT	59634-9728

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

**Transaction ID : SA17.308486**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		09		2015

**CONTRIBUTION**

Amount of Each Receipt this Period

**250.00**

**Subtotal Of Receipts This Page (optional)**.....

**2250.00**

**Total This Period (last page this line number only)**.....